

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MW		11-26-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	CH	1119	12-03-01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	699/1886 1164	7/30/02 02/12/03 18-01-02

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final Original	12/1/03
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY

12/1/03
MW
7/8/03
804
8/24/03